

## **HEALTH ANNUAL STATEMENT**

## FOR THE YEAR ENDING DECEMBER 31, 2004 OF THE CONDITION AND AFFAIRS OF THE

NAIC Group Code

1137

OmniCare Health Plan, Inc.

NAIC Company Code 12193 Employer's ID Number 20-1052897

(Curr	ent Period) (Prior Period)			
Organized under the Laws	of Michigan	, State of Dor	micile or Port of Entry	Michigan
Country of Domicile		United States of A	merica	
Licensed as business type:	Life, Accident & Health [ ]	Property/Casualty [ ]	Dental Service Corporation [ ]	
	Vision Service Corporation [ ]	Other [ ]	Health Maintenance Organization	[X]
	Hospital, Medical & Dental Service	or Indemnity [ ]	Is HMO, Federally Qualified? Yes	[X] No[]
Incorporated	04/22/2004	Commenced Business	10/01/20	04
Statutory Home Office	1333 Gratiot, Brewery Park (	One, Ste 400 ,	Detroit, MI 4820	7
	(Street and Number)		(City or Town, State and Zip	Code)
Main Administrative Office		1333 Gratiot, Brewer		
Г	Detroit, MI 48207	(Street and	Number) 313-465-1519	
(City or	Town, State and Zip Code)		(Area Code) (Telephone Number)	
Mail Address1	333 Gratiot, Brewery Park One, Ste 4 (Street and Number or P.O. Box)	00,	Detroit, MI 48207 (City or Town, State and Zip Code	9)
Primary Location of Books a	,	1333 Gratio	ot, Brewery Park One, Ste 400	,,
-			(Street and Number)	
	Oetroit, MI 48207 Town, State and Zip Code)		313-465-1519 (Area Code) (Telephone Number)	
Internet Website Address		www.omnicarehea	lthplan.com_	
Statutory Statement Contact	Kenyata J. Rogers		313-465-1519	
	(Name) Rogers@cvty.com	<del></del>	(Area Code) (Telephone Number) (I 313-465-1604	Extension)
N	(E-mail Address)		(FAX Number)	
Policyowner Relations Conta	act	1333 Gratiot, Brewer	y Park One, Ste 400	
,	(Street and Numb			
	Detroit, MI 48207 Town, State and Zip Code)		313-465-1519 (Area Code) (Telephone Number) (Extension	1)
Massa	T'11 -	OFFICERS	James	T'u -
Name Bobby Jones	Title . Chief Executive Office		Name erly Allen	Title sial & Operating Officer
			· · · · · · · · · · · · · · · · · · ·	
	ОТ	HER OFFICERS		
	DIRECT	ORS OR TRUSTE	ES	
State of				
County of	ss			
The officers of this reporting ent	ity, being duly sworn, each depose and say	that they are the described offi	cers of said reporting entity, and that on	the reporting period stated
above, all of the herein described	d assets were the absolute property of the s	aid reporting entity, free and clea	ar from any liens or claims thereon, excep	t as herein stated, and that
of the condition and affairs of the	ted exhibits, schedules and explanations the e said reporting entity as of the reporting pe	riod stated above, and of its inc	ome and deductions therefrom for the per	riod ended, and have been
	e NAIC Annual Statement Instructions and A			
respectively. Furthermore, the so	cope of this attestation by the described office	cers also includes the related co	rresponding electronic filing with the NAIC	C, when required, that is an
to the enclosed statement.	differences due to electronic filing) of the en	iciosed statement. The electronic	c filling may be requested by various regula	ators in lieu of or in addition
<b>.</b>			a. Is this an original filing?	Yes [ X ] No [ ]
Subscribed and sworn to b	efore me this		<ul><li>b. If no,</li><li>1. State the amendment numbe</li></ul>	r
uay 01	<u>, , , , , , , , , , , , , , , , , , , </u>		2. Date filed	
			3. Number of pages attached	
•			r G	-

## **EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonaumilleu	Admitted
0199999 Total individuals						
Group subscribers:						
	NON		·····		<b></b>	
			<b>†</b>			
0299997 Group subscriber subtotal	0	0	0	0	0	0
0299997 Group subscriber subtotal						
0299999 Total group	0	0	0	0	0	0
0399999 Premiums due and unpaid from Medicare entities						
0399999 Premiums due and unpaid from Medicare entities 0499999 Premiums due and unpaid from Medicaid entities						
0599999 Accident and health premiums due and unpaid (Page 2, Line 12)	0	n n	0	n n	0	0
0000000 Notident and nearth promitting due and unpaid (1 age 2, Line 12)	0	0	Ů	0	0	Ů

## **EXHIBIT 3 - HEALTH CARE RECEIVABLES**

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
ndividually Listed Receivables:	0	,	^	,		
0299998 - Aggregate of amounts not individually listed above.	0	0	0	0		
0299999 -	0	0	0	0		
Detroit Medical Center	1,313,488	2,145,496	3,297,044			6,756,02
0399999 -	1,313,488	2,145,496	3,297,044			6,756,02
0499998 - Aggregate of amounts not individually listed above. 0499999 -	0	0	0			
0499999 -	0	0	0			
State of Michigan - Medicaid		413,310	354,998			1,028,35
0699998 – Aggregate of amounts not individually listed above.		0	0	0		136,89
0699999 -	396,940	413,310	354,998	0		
						-
						-
						-
						***************************************
						1
						I
						I
0799999 Gross health care receivables	1,710,428	2,558,806	3,652,042	0		7,921,27

## **EXHIBIT 4 – CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

Aging Analysis of Unpaid Claims												
1	2	3	4	5	6	7						
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total						
Claims Unpaid (Reported)												
	.[0]	0	0			0						
	-											
	· · · · · · · · · · · · · · · · · · ·											
0199999 Individually listed claims unpaid		0	0		0	0						
0299999 Aggregate accounts not individually listed-uncovered		GE 000	GE 700			U						
0399999 Aggregate accounts not individually listed-covered	418,196	65,802	65,790	0	0	549,788						
0499999 Subtotals	418,196	65,802	65,790	0	0	549,788						
0599999 Unreported claims and other claim reserves						17,010,587						
0699999 Total amounts withheld						17. 500. 075						
0799999 Total claims unpaid						17,560,375						
0899999 Accrued medical incentive pool and bonus amounts						344,543						

**EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES** 

1	2	3	4	5	6	Adm	itted
	_		•	1	_	7	8
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Current	Non-Current
Individually Listed Receivables:							
			<u> </u>				
		NON	····				
			••••				
0199999 Individually listed receivables	0	0	0	0	0	0	0
0199999 Individually listed receivables							
0399999 Total gross amounts receivable	0	0	0	0	0	0	0

## **EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES**

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Coventry Health Care, Inc	Income Taxes.	141,891	141,891	
0199999 Individually listed payables		141,891	141,891	0
0299999 Payables not individually listed				
0199999 Individually listed payables		141,891	141,891	0

#### **EXHIBIT 7 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS**

	<del></del>		<del>, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			
	1 Direct Medical Expense	2 Column 1 as a %	3 Total Members	4 Column 3 as a %	5 Column 1 Expenses Paid to	6 Column 1 Expenses Paid to
Payment Method	Payment	of Total	Covered	of Total	Affiliated Providers	Non-Affiliated Providers
Capitation Payments:						
Medical groups	2,926,595	16.8	62,455	100.0	0	2,926,595
2. Intermediaries	359,940	2.1		0.0	0	359,940
3. All other providers	188,450	1 . 1		0.0	0	188,450
Total capitation payments	3,474,985	20.0	62,455	100.0	0	3,474,985
Other Payments:			,			
5. Fee-for-service	911,690	5.2	XXX	XXX		911,690
6. Contractual fee payments	13,000,395	74.8	XXX	XXX		13,000,395
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX		
Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX		
9. Non-contingent salaries	0	0.0	XXX	XXX		
10. Aggregate cost arrangements	0	0.0	XXX	XXX		
11. All other payments	0	0.0	XXX	XXX		
12. Total other payments	13,912,085	80.0	XXX	XXX	0	13,912,085
13. TOTAL (Line 4 plus Line 12)	17,387,070	100 %	XXX	XXX	0	17,387,070

#### **EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES**

	EXHIBIT 1-1 ALL 2-00 MINALL OF THATOACHORO WITH INTERMEDIATIES													
1	2	3	4	5	6									
			Average		Intermediary's									
			Average Monthly Capitation	Intermediary's	Intermediary's Authorized Control Level RBC									
NAIC Code	Name of Intermediary	Capitation Paid	Capitation	Intermediary's Total Adjusted Capital	Control Level RRC									
147110 0000	Medical Transportation Management Los	179,028	50 676	Total Adjusted Capital	CONTROL ECVEL LIBO									
	Medical Transportation Management, Inc	179,020												
	Joint Venture Hospital Laboratories	180,912	00 , 304											
9999999 Totals		359,940	XXX	XXX	XXX									
ו פפפפפפ		339,940	^^^	^^^	^^^									

## **EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED**

·	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
Administrative furniture and equipment	159,075		6,073	153,002	153,002	0
Medical furniture, equipment and fixtures						
Pharmaceuticals and surgical supplies						
Durable medical equipment						
5. Other property and equipment						
6. Total	159,075	0	6,073	153,002	153,002	0



## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a) 1. Detroit, Michigan

REPORT FOR: 1. CORPORATION OmniCare Health Plan, Inc.

						_				(LOCA	TION)		
NAIC Group Code 1137 BUSINESS IN THE STATE C	F Michigan				DURING THE YE	AR 2004	1	1			NAIC Compar	ny Code	12193
	1	Compre (Hospital 8		4	5	6	7	8	9	10	11	12	13
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:													
1. Prior Year	0												
2 First Quarter	0												
3 Second Quarter	0												
4. Third Quarter	0												
5. Current Year	62,455								62,455				
6 Current Year Member Months	188,177								188,177				
Total Member Ambulatory Encounters for Year:													
7. Physician	66,734								66,734				
8. Non-Physician	16,858								16,858				
9. Total	83,592	0	0	0	0	0	0	0	83,592	0	0	0	C
10. Hospital Patient Days Incurred	10,008								10,008				
11. Number of Inpatient Admissions	2,230								2,230				
12. Health Premiums Written	39,429,647								39,429,647				
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written	0												
15. Health Premiums Earned	39,429,647								39,429,647				
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services	17 , 387 , 070								17 , 387 , 070				
18. Amount Incurred for Provision of Health Care Services	35,291,988								35,291,988				

(a) For health business: number of persons insured under PPO managed care products and number of persons under indemnity only products



## **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION OmniCare Health Plan, Inc.

2.

NAIO Corres Codo 4407 DIJONECO INTLIE CTATE OF						AD 0004				(LOCA	TION)	0 - 1 -	10100
NAIC Group Code 1137 BUSINESS IN THE STATE OF	Consolidated	Compre	hensive	1	OURING THE YE	AH 2004	1				NAIC Compar	ny Code	12193
	1	(Hospital 8	& Medical)	4	5	6	7	8	9	10	11	12	13
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:													
1. Prior Year	0	0	0	0	0	0	0	0	0	0	0	0	0
2 First Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0
3 Second Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Third Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current Year	62,455	0	0	0	0	0	0	0	62,455	0	0	0	0
6 Current Year Member Months	188,177	0	0	0	0	0	0	0	188,177	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician	66,734	0	0	0	0	0	0	0	66,734	0	0	0	0
8. Non-Physician	16,858	0	0	0	0	0	0	0	16,858	0	0	0	0
9. Total	83,592	0	0	0	0	0	0	0	83,592	0	0	0	0
10. Hospital Patient Days Incurred	10,008	0	0	0	0	0	0	0	10,008	0	0	0	0
11. Number of Inpatient Admissions	2,230	0	0	0	0	0	0	0	2,230	0	0	0	0
12. Health Premiums Written	39 , 429 , 647	0	0	0	0	0	0	0	39,429,647	0	0	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	39,429,647	0	0	0	0	0	0	0	39,429,647	0	0	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	17 ,387 ,070	0	0	0	0	0	0	0	17,387,070	0	0	0	0
18. Amount Incurred for Provision of Health Care Services	35,291,988	0	0	0	0	0	0	0	35,291,988	0	0	0	0

(a) For health business: number of persons insured under PPO managed care products 0\_\_\_\_\_and number of persons under indemnity only products \_\_\_\_\_0

## **SCHEDULE A - VERIFICATION BETWEEN YEARS**

1.	Book/adjusted carrying value, December 31, prior year (prior year statement).	0
	Increase (decrease) by adjustment:	
	2.1 Totals, Part 1, Column 11  2.2 Totals, Part 3, Column 7  Cost of acquired, (Totals, Part 2, Column 6, net of encumbance contain 7) old set on diffuse and permanent improvements (Column 9)	0
	2.2 Totals, Part 3, Column 7	0
3.	2.2 Totals, Part 3, Column 7	0
4.	Cost of additions and permanent improvements:	
	4.1 Totals, Part 1, Column 14	0
	4.2 Totals, Part 3, Column 9	
5.	Total profit (loss) on sales, Part 3, Column 14	0
6.	Increase (decrease) by foreign exchange adjustment:	
	6.1 Totals, Part 1, Column 12	0
	6.2 Totals, Part 3, Column 8	
7.	Amounts received on sales, Part 3, Column 11 and Part 1, Column 13	0
	Book/adjusted carrying value at end of current period	
	Total valuation allowance	
	Subtotal (Lines 8 plus 9)	
	Total nonadmitted amounts	
12.	Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)	0
	COUEDINE D. VEDICIONATION DETWEEN VENDO	
	SCHEDULE B - VERIFICATION BETWEEN YEARS	
_		0
	Book value/recorded investment excluding accrued interest of mortgages owned, December 31 of prior year	
2.	Amount loaned during year:  2.1 Actual cost at time of acquisitions	
		0
•	2.2 Additional investment made after acquisitions	
	Accrual of discount and mortgage interest points and commitment fees	
	Increase (decrease) by adjustment	
	Total profit (loss) on sale	
	Amounts paid on account or in full during the year	
	Amortization of premium	
	Increase (decrease) by foreign exchange adjustment	_
	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period	
	Total valuation allowance	_
	Subtotal (Lines 9 plus 10)	
	Total nonadmitted amounts	
13.	Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column)	
	SCHEDULE BA - VERIFICATION BETWEEN YEARS	
	SCHEDULE DA - VEHII ICATION DETWEEN TEANS	
1	Book/adjusted carrying value of long-term invested assets owned December 31 of prior year	0
	Cost of acquisitions during year:	
۷.	Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year  Cost of acquisitions during year:  2.1 Actual cost at time of acquisitions	
	2.2 Additional investment made after acquisitions	0
3	Accrual of discount	
	Increase (decrease) by adjustment	
	Total profit (loss) on sale	
	Amounts paid on account or in full during the year	
	Amortization of premium	
	Increase (decrease) by foreign exchange adjustment	
	Book/adjusted carrying value of long-term invested assets at end of current period	
	Total valuation allowance	
	Subtotal (Lines 9 plus 10)	
	Total nonadmitted amounts	
	Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3)	
	Cateriorit 1445 or long term invested accord at one or content period (1 age 2, Line 1, Column 0)	0

## **SCHEDULE D - PART 1A - SECTION 1**

Quality	and Maturity	Distribution of F	All Bonds Owned	December 31.	at Book/Adi	usted Carry	ving Values b	v Maior T	ypes of Issues and NAIC Designation	ns

		Quality and Maturi	ty Distribution of All Be	onds Owned Decemb	er 31, at Book/Adjuste	d Carrying Values by I	Major Types of Issues	and NAIC Designation	s		
Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments, Schedules D &											` '
1.1 Class 1	0	2,293,626	0	0	0	2,293,626	14.7	0	0.0	2,293,626	0
1.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
1.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
1.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	0	2,293,626	0	0	0	2,293,626	14.7	0	0.0	2,293,626	0
2. All Other Governments, Schedules	D & DA (Group 2)									, , , , , , , , , , , , , , , , , , ,	
2.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
2.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
2.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	
2.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	C
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories and Possessions	s etc., Guaranteed, So	chedules D & DA (Grou	p 3)								
3.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
3.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
3.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
3.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	C
4. Political Subdivisions of States, Ter	rritories and Possess	ions. Guaranteed. Sch	edules D & DA (Group	4)				-			
4.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
4.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	
4.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
4.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue & Special Assessi	ment Obligations etc.	, Non-Guaranteed, Sch	edules D & DA (Group	5)			,,,		***		<u> </u>
5.1 Class 1	0	L0	0	0	0	0	0.0	0	0.0	0	0
5.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
5.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
5.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	
5.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

## SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

		Quality and Maturi	ty Distribution of All B	onds Owned December	er 31, at Book/Adjuste	d Carrying Values by N	Major Types of Issues a	and NAIC Designations	5		
	1	2	3	4	5	6	7	8	9	10	11
		Over 1 Year Through		Over 10 Years			Col. 6 as a	Total from Col. 6	% From Col. 7	Total Publicly	Total Privately Placed
Quality Rating per the NAIC Designation		5 Years	10 Years	Through 20 Years	Over 20 Years	Total Current Year	% of Line 10.7	Prior Year	Prior Year	Traded	(a)
6. Public Utilities (Unaffiliated), Sched	dules D & DA (Group 6	5)	T								
6.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
6.2 Class 2	201,970	0	0	0	0	201,970	1.3	0	0.0	201,970	0
6.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
6.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	201,970	0	0	0	0	201,970	1.3	0	0.0	201,970	0
7. Industrial & Miscellaneous (Unaffili	iated), Schedules D &	DA (Group 7)									
7.1 Class 1	13,000,022	0	0	0	0	13,000,022	83.2	0	0.0	13,000,022	0
7.2 Class 2	126,576	0	0	0	0	126,576	8.0	0	0.0	126,576	0
7.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
7.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals	13,126,598	0	0	0	0	13,126,598	84.0	0	0.0	13,126,598	0
8. Credit Tenant Loans, Schedules D	& DA (Group 8)										
8.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
8.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
8.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
8.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
8.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
8.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates,	Schedules D & DA (G	roup 9)									
9.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
9.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
9.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
9.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
9.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
9.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

## **SCHEDULE D - PART 1A - SECTION 1 (continued)**

		Quality and Matur	ty Distribution of All B	onds Owned December	er 31, at Book/Adjuste	d Carrying Values by N	lajor Types of Issues	and NAIC Designation			
	1	2	3	4	5	6	7	8	9	10	11
			Over 5 Years Through	Over 10 Years			Col. 6 as a	Total from Col. 6	% From Col. 7	Total Publicly	Total Privately Placed
Quality Rating per the NAIC Designation	1 Year or Less	5 Years	10 Years	Through 20 Years	Over 20 Years	Total Current Year	% of Line 10.7	Prior Year	Prior Year	Traded	(a)
10. Total Bonds Current Year											
10.1 Class 1	13,000,022	2,293,626	0	0	0	15,293,648	97 .9	XXX	XXX	15,293,648	0
10.2 Class 2	328,546	0	0	0	0	328,546	2.1	XXX	XXX	328 , 546	0
10.3 Class 3	0	0	0	0	0	0	0.0	ХХХ	XXX	0	0
10.4 Class 4	0	0	0	0	0	0	0.0	XXX	ХХХ	0	0
10.5 Class 5	0	0	0	0	0	(c)0	0.0	ХХХ	XXX	0	0
10.6 Class 6	0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
10.7 Totals	13,328,568	2,293,626	0	0	0	<sup>(b)</sup> 15,622,194	100.0	ХХХ	ХХХ	15,622,194	0
10.8 Line 10.7 as a % of Col. 6	85.3	14.7	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year		-									
11.1 Class 1	0	0	0	0	0	ХХХ	ХХХ	0	0.0	0	0
11.2 Class 2	0	0	0	0	0	ХХХ	ХХХ	0	0.0	0	0
11.3 Class 3	0	0	0	0	0	ХХХ	XXX	0	0.0	0	0
11.4 Class 4	0	0	0	0	0	XXX	ХХХ	0	0.0	0	0
11.5 Class 5	0	0	0	0	0	ХХХ	XXX	(c)0	0.0	0	0
11.6 Class 6	0	0	0	0	0	XXX	XXX	(c)0	0.0	0	0
11.7 Totals	0	0	0	0	0	ХХХ	ХХХ	(b) 0	0.0	0	0
11.8 Line 11.7 as a % of Col. 8	0.0	0.0	0.0	0.0	0.0	XXX	XXX	0.0	XXX	0.0	0.0
12. Total Publicly Traded Bonds		•	•								
12.1 Class 1	13,000,022	2,293,626	0	0	0	15,293,648	97.9	0	0.0	15,293,648	XXX
12.2 Class 2	328,546	0	0	0	0		2.1	0	0.0	328,546	XXX
12.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.7 Totals	13,328,568	2,293,626	0	0	0	15,622,194	100.0	0	0.0	15,622,194	XXX
12.8 Line 12.7 as a % of Col. 6	85.3	14.7	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7,											
Col. 6, Section 10	85.3	14.7	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds	•	•	•								
13.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.5 Class 5	0	0	0	0	0	n n	0.0	0	0.0	XXX	0
13.6 Class 6	0	0	0	0	n	n n	0.0	0	0.0	XXX	0
13.7 Totals	n	0	n	0	n	n	0.0	0	0.0	XXX	n
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
13.9 Line 13.7 as a % of Line 10.7,								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
Joi. 0, Jection 10	0.0		0.0	0.0	0.0	0.0	MM	////	////	MM	0.0

## **SCHEDULE D - PART 1A - SECTION 2**

	Maturity Distribu	tion of All Bonds O	wned December 31.	at Book/Adjusted C	arrving Values by N	laior Type and Subt	vpe of Issues				
	1	2	3	4	5	6	7	8	9	10	11
	•	Over 1 Year	Over 5 Years	Over 10 Years	•	_	Col. 6 as a %	Total from Col 6	% From Col. 7	Total Publicly	Total Privately
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Total Current Year	of Line 10.7	Prior Year	Prior Year	Traded	Placed
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Issuer Obligations	0	2,293,626	0	0	0	2,293,626	14.7	0	0.0	2,293,626	0
1.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	0	2,293,626	0	0	0	2,293,626	14.7	0	0.0	2,293,626	0
2. All Other Governments, Schedules D & DA (Group 2)		, ,				, ,				, ,	
2.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
2.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-											
BACKED SECURITIES											
2.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories, and Possessions Guaranteed, Schedules D & DA (Group 3)	_										
3.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
3.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	0	0		0	•	0	0.0		0.0		
3.3 Defined	D	0	0	0	0	0	0.0	0	0.0	D	0
3.4 Other	0	0	0	0	0	0	0.0	0	0.0		0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
3.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedu	ules D & DA (Group 4)										
4.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
Single Class Mortgage-Backed/Asset-Backed Securities     MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
4.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 Other	0	0	0	0	0	0	0.0	Ω	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
4.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedu	ules D & DA (Group 5)			İ		1		İ	,,,,		Ì
5.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
5.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
5.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	J0
5.4 Other	0	0	0	0	0	0	0.0	J0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
5.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	n	n	n	n	n	n	0.0	n	0.0	n	n

## SCHEDULE D - PART 1A - SECTION 2 (continued)

		Maturity Distribution	n of All Bonds Owned	December 31, at Book	/Adjusted Carrying Va	ilues by Major Type an	d Subtype of Iss	sues			
	1	2	3	4	5	6	7	8	9	10	11
		Over 1 Year Through	Over 5 Years	Over 10 Years			Col. 6 as a	Total from Col. 6	% From Col. 7	Total Publicly	Total Privately
Distribution by Type	1 Year or Less	5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Total Current Year	% of Line 10.7	Prior Year	Prior Year	Traded	Placed
6. Public Utilities (Unaffiliated), Schedules D & DA (											
6.1 Issuer Obligations	201,970	0	0	0	0	201,970	1.3	0	0.0	201,970	
6.2 Single Class Mortgage-Backed/Asset-Based     Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES		-			-						
6.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	
6.4 Other	Ω	Ω	Ω	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
6.5 Defined	0	0	0	0	Ω	0	0.0	0	0.0	0	0
6.6 Other	. 0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	201,970	0	0	0	0	201,970	1.3	0	0.0	201,970	0
7. Industrial & Miscellaneous (Unaffiliated), Schedu	les D & DA (Group 7)	- <u>-</u>									
7.1 Issuer Obligations	13,126,598	0	0	0	0	13,126,598	84.0	0	0.0	13,126,598	0
7.2 Single Class Mortgage-Backed/Asset-Based Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
7.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 Other	0	Ω	0	0	Ω	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
7.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 Other	. 0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals	13,126,598	0	0	0	0	13,126,598	84.0	0	0.0	13,126,598	0
8. Credit Tenant Loans, Schedules D & DA (Group 8	3)										
8.1 Issuer Obligations	0	0	٥	٥	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parents, Subsidiaries and Affiliates, Schedules D	% DA (Group 9)										
9.1 Issuer Obligations	0	0	0	٥	0	0	0.0	0	0.0	0	0
9.2 Single Class Mortgage-Backed/Asset-Based Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
9.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	0
9.4 Other	٥	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
9.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	
9.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

## SCHEDULE D - PART 1A - SECTION 2 (continued) urity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Maturity Distrib	ution of All Bond	s Owned Decemb		usted Carrying Va			Issues	T		•	
	1	2	3	4	5	6	7	8	9	10	11
		Over 1 Year	Over 5 Years	Over 10 Years		Total		Total From Col. 6		Total Publicly	Total Privately
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Current Year	of Line 10.7	Prior Year	Prior Year	Traded	Placed
10. Total Bonds Current Year											
10.1 Issuer Obligations	13,328,568	2,293,626	0	0	0	15,622,194	100.0	XXX	XXX	15,622,194	0
10.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
10.3 Defined	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.4 Other	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
10.5 Defined	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.6 Other	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.7 Totals	13,328,568	2.293.626	0	0	0	15.622.194	100.0	XXX	XXX	15.622.194	0
10.8 Line 10.7 as a % of Col. 6	85.3	14 7	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year	00.0	11.7	0.0	0.0	0.0	100.0	7777	7001	7001	100.0	0.0
11.1 Issuer Obligations	0	٥	0	0	0	XXX	XXX	0	0.0	0	0
11.1 Issuer Colligations  11.2 Single Class Mortgage-Backed/Asset-Backed Securities		n		 N		XXX	XXX	n	0.0	n	n
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	U			0	U	ΛΛΛ	ΛΛΛ	U		U	
11.3 Defined	0	0	0	0	0	XXX	XXX	0	0.0		0
1.1.5 = 555	D	D	U	 N	U	XXX	XXX	U	0.0	U	D
11.4 Other	U		U		U		ΛΛΛ	U		U	U
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES	0	0	0	0	0	XXX	XXX	0	0.0		_
11.5 Defined	0	0 N	 N		 N	XXX	XXX	U		U	U
11.6 Other	Ū	U	0	0	U			0		Ü	0
11.7 Totals	0	0	0	0	0	XXX	XXX	0		0	0
11.8 Line 11.7 as a % of Col. 8	0.0	0.0	0.0	0.0	0.0	XXX	XXX	0.0	XXX	0.0	0.0
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations	13,328,568	2,293,626	0	0	0	15,622,194	100.0	0	0.0	15,622,194	XXX
12.2 Single Class Mortgage-Backed/Asset-Backed Securities	0	٥	0	0	0	0	0.0	0	0.0	0	XXX
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
12.3 Defined	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.4 Other	0	0	0	0	0	0	0.0	0	0.0	0	XXX
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES											
12.5 Defined	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.6 Other	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.7 Totals	13,328,568	2,293,626	0	0	0	15.622.194	100.0	0	0.0	15,622,194	XXX
12.8 Line 12.7 as a % of Col. 6	85.3	14.7	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	85.3	14.7	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds			***	***	***						
13.1 Issuer Obligations	n	n	n	0	Λ	n	0.0	0	0.0	XXX	n
13.2 Single Class Mortgage-Backed/Asset-Backed Securities	n	n	 N	0 N	 N	n	0.0	n	0.0	XXX	n n
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES			U								1
13.3 Defined	n	n	Λ	0	Λ	Λ	0.0	Λ	0.0	XXX	n
13.4 Other	 0	n l	 n	0 N	 N	 Ω	0.0	 Ω	0.0	XXX	n
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES	U			0						ΛΛΛ	
	0	n	0	0	Λ	0	0.0	0	0.0	XXX	n
	0	0	U	0 0	 N	U	0.0	0		XXX	
	ů	0	0	0	0	0	0.0	0	0.0	XXX	0
13.7 Totals	0	U	U		U	0				XXX	0
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX		0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

## **SCHEDULE DA - PART 2**

Verification of SHORT-TERM INVESTMENTS Between Years

Verification of SHORT-TERM IN	VESTMENTS Between Years				
	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets(a)	Investments in Parent, Subsidiaries and Affiliate
Book/adjusted carrying value, prior year	0	0	0	0	
Cost of short-term investments acquired	52,487,743	52,487,743			-
3. Increase (decrease) by adjustment	7 ,537	7 ,537			-
Increase (decrease) by foreign exchange adjustment	0				
Total profit (loss) on disposal of short-term investments	0				
Consideration received on disposal of short-term investments	39,166,712	39,166,712			
7. Book/adjusted carrying value, current year	13,328,568	13,328,568	0	0	
8. Total valuation allowance	0				
9. Subtotal (Lines 7 plus 8)	13,328,568	13,328,568	0	0	
10. Total nonadmitted amounts	0				
11. Statement value (Lines 9 minus 10)	13,328,568	13,328,568	0	0	
12. Income collected during year	28,842	28,842			
13. Income earned during year	89,211	89,211			

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - VBY

NONE

Schedule DB - Part B - VBY NONE

Schedule DB - Part C - VBY NONE

Schedule DB - Part D - VBY

NONE

Schedule DB - Part E - VBY NONE

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

Schedule S - Part 1 - Section 2

NONE

## SCHEDULE S - PART 2 Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC	2	3	4	insuring Company as of December 31, Curre	6	7
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Location	Paid Losses	Unpaid Losses
31973	75-1296086	10/01/2004	Coventry Health and Life Insurance Company	Delaware USA	33,790	Oripaid Edddoo
0499999 - Acci	ident and Health	Affiliates	soventry hearth and Erre mourance company	Botawaro, oon.	33,790	
0099999 - 1018	als - Accident an	а неаттп			33,790	
		***************************************				
	•					
	· · · · · · · · · · · · · · · · · · ·					
	· · · · · · · · · · · · · · · · · · ·					
	· · · · · · · · · · · · · · · · · · ·					
	•					
0799999 - To	itals				33,790	

## **SCHEDULE S - PART 3 - SECTION 2**

1	2	3	4	einsurance Ceded Accident and Health Insu	6	7	8	9	Outstanding	Surplus Relief	12	13
NAIC	_	O	т		Ŭ	<b>'</b>	Ŭ	Reserve Credit	10	11	Modified	10
Compony	Fodoral ID						Uncorned Premiums	Taken Other than for	10	l '''	Coinsurance	Eundo Withhold
Company Code	Number	Effective Date	Name of Company Coventry Health & Life Insurance Company	Location	T	Dramiuma	(actimated)	Taken Other than for Unearned Premiums	Current Year	Dries Vees	Reserve	Funds Withheld Under Coinsurance
Code	Number	Effective Date	Name of Company	Location	Type	Premiums50,433	(estimated)	Unearned Premiums	Current Year	Prior Year	Reserve	Under Coinsurance
81973	75 - 1296086	10/01/2004	Coventry Health & Life Insurance Company	Delaware, USA	SSL/A/I	50,433	0	0				
0199999 -	· Total Affiliate	S				50,433						
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	Totals					50 433						

## **SCHEDULE S - PART 4**

	Reinsurance Ceded to Unauthorized Companies  1												
1	2	3	4	5	6	7	8	9	10	11	12	13	14
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total Cols. (5+6+7)	Letters of Credit	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9+10+11+12+13 But Not in Excess of Col. 8
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1199999	Totals	•											

# Schedule S-Part 5 Five-Year Exhibit of Reinsurance Ceded Business (000 Omitted)

		(000 C	millea)			
		1 2004	2 2003	3 2002	4 2001	5 2000
Α. (	DPERATIONS ITEMS	====	=000		=00.	=====
1.	Premiums	0	0	0	0	0
2.	Title XVIII-Medicare		0	0	0	0
3.	Title XIX-Medicaid				0	0
4.	Commissions and reinsurance expense allowance				0	0
5.	Total hospital and medical expenses				0	0
В. І	BALANCE SHEET ITEMS					
6.	Premiums receivable		0	0	0	0
7.	Claims payable		0	0	0	0
8.	Reinsurance recoverable on paid losses	34	0	0	0	0
9.	Experience rating refunds due or unpaid		0	0	0	0
10.	Commissions and reinsurance expense allowances unpaid		0	0	0	0
11.	Unauthorized reinsurance offset	0	0	0	0	0
	UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12.	Funds deposited by and withheld from (F)	0	0	0	0	0
13.	Letters of credit (L)	0	0	0	0	0
14.	Trust agreements (T)	0	0	0	0	0
15.	Other (O)	0	0	0	0	0

## **SCHEDULE S-PART 6**

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	nestatement of balance Sheet to identify Net C	1 1	2	3
		As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 10)	24,826,258		24,826,258
2.	Accident and health premiums due and unpaid (Line 12)	0		0
3.	Amounts recoverable from reinsurers (Line 13.1)		(33,790)	0
4.	Net credit for ceded reinsurance	xxx	33,790	33,790
5.	All other admitted assets (Balance)	8,448,661		8,448,661
6.	Total assets (Line 26)	33,308,709	0	33,308,709
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7.	Claims unpaid (Line 1)	17,560,375	0	17,560,375
8.	Accrued medical incentive pool and bonus payments (Line 2)	344,543		344,543
9.	Premiums received in advance (Line 8)	0		0
10.	Reinsurance in unauthorized companies (Line 18)	0		0
11.	All other liabilities (Balance)	1,161,543		1,161,543
12.	Total liabilities (Line 22)	19,066,461	0	19,066,461
13.	Total capital and surplus (Line 30)	14,242,248	XXX	14,242,248
14.	Total liabilities, capital and surplus (Line 31)	33,308,709	0	33,308,709
	NET CREDIT FOR CEDED REINSURANCE			
15.	Claims unpaid	0		
16.	Accrued medical incentive pool.	0		
17.	Premiums received in advance	0		
18.	Reinsurance recoverable on paid losses			
19.	Other ceded reinsurance recoverables	0		
20.	Total ceded reinsurance recoverables	33,790		
21.	Premiums receivable	0		
22.	Unauthorized reinsurance	0		
23.	Other ceded reinsurance payables/offsets	. 0		
24.	Total ceded reinsurance payable/offsets	0		
25.	Total net credit for ceded reinsurance	33,790		

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## SCHEDULE Y (continued) PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES												
1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
12193	. 20-1052897 . 52-2073000 . 75-1296086	OmniCare Health Plan		16,000,990			(1,847,924)	(50,433)			14,102,633 (14,153,066)	33,790
04070	. 52-2073000	Coventry Health Care, Inc		(16,000,990)			1,847,924	FO 400			(14, 153, 066)	(00.700)
81973	. 75-1296086	Coventry Health & Life Insurance, Inc.						50,433			50,433	(33,790)
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9999999	ontrol Totals		0	0	0	0	0	0	XXX	0	0	0

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

#### MARCH FILING

1.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	YES		NO	) [ )	( ]
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES	[ X ]	NO	] (	]
3.	Will an actuarial certification be filed by March 1?	YES	[ X ]	NO	] (	]
4.	Will the Risk-based Capital Report be filed with the NAIC by March 1?	YES	[ X ]	NO	] (	]
5.	Will the Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES	[ X ]	NO	] (	]
6.	Will the Life Supplement be filed the state of domicile and the NAIC by March 1?	YES	[ ]	NO	( ] (	( ]
7.	Will the Property/Casualty Supplement be filed the state of domicile and the NAIC by March 1?	YES	[ ]	NO	( ] (	( ]
	APRIL FILING					
8.	Will Management's Discussion and Analysis be filed by April 1?	YES	[ X ]	NO	] (	]
9.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile by April 1?	YES	[ ]	NO	( ] (	( ]
10.	Will the Investment Risks Interrogatories be filed by April 1?	YES	[ X ]	NO	] (	]
	JUNE FILING					
11.	Will an audited financial report be filed by June 1 with the state of domicile?	YES	[ X ]	NO	] (	]
XPL	ANATIONS:					

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#### BAR CODE:









## **OVERFLOW PAGE FOR WRITE-INS**